KUMASI TECHNICAL INSTITUTE (KTI)

ADMISSION ACCEPTANCE FORM



SECTION A: TO BE COMPLETED BY STUDENT (IN CAPITALS)

ABDALLAH MOHAMMED KAMIL

IABI	DALLAH MOHAMMED KAMIL accept the conditions of admission to
	ourse in
Student's	Full Address
РОВОХ	2437
ADUM	
KUMASI A	ASHANTI AK0900822
Ghana	
Signature	Date:
SECTION	B" TO BE COMPLETED BY PARENT/GUARDIAN
I have read the rules, regulations and conditions regarding my ward's admission and I agree that he/she should be enrolled at Kumasi Technical Institute on the basis of what I have read.	
Name:	ABDALLAH SEIDU
Address:	P O BOX 2437 ADUM KUMASI ASHANTI AK0900822 Ghana
Telephone	Mobile No: 0550445960
Email:	
Signature	Date:
NOTE: TH	HE COMPLETED ACCEPTANCE LETTER SHOULD BE RETURNED TO THE

PRINCIPAL NOT LATER THAN 14 DAYS AFTER DOWNLOADING/PRINTING.